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THOMAS L. GARTHWAITE, M.D. Director and Chief Medical Officer

FRED LEAF Chief Operating Officer

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES 313 N. Figueroa, Los Angeles, CA 90012 (213) 240-8101

October 18, 2004

TO:

Each Supervisor

FROM:

Thomas L. Garthwaite, M.D.

Director and Chief Medical Officer

SUBJECT:

DHS COVERAGE AND ELIGIBILITY DETERMINATION

This is to provide you with a final report on the Department's implementation of the health coverage and patient eligibility determination recommendations your Board approved on June 3, 2003 regarding the limitation of non-emergency medical care to Los Angeles County (LACO) residents only.

## Patient Eligibility Determination - Non-emergency Care

Effective October 1, 2003, the Department implemented its policy limiting non-emergency medical care to LACO residents in the Health Centers (HC), Comprehensive Health Centers (CHC), and the Multi-Service Ambulatory Care Center (MACC) for <a href="new patients">new patients</a>. Policy implementation for <a href="mestablished">established</a> patients became effective November 1, 2003. Effective December 1, 2003, the Department implemented these policies for <a href="mestablished">new patients in the hospital-based outpatient clinics and hospital inpatient <a href="mestablished">scheduled</a> care. The policy for <a href="mestablished">established</a> patients in the hospital-based outpatient clinics was implemented on January 2, 2004 and for hospital emergency room follow-up implementation was March 1, 2004.

On May 25, 2004, your Board approved amendments to the County's Public-Private Partnership (PPP) contracts to implement this policy with a 45-day implementation period with the full implementation effective July 1, 2004. The Office of Ambulatory Care (OAC) conducted training for the PPP partners during May and June 2004. The OAC continues to work with the PPP contractors to ensure they are appropriately implementing this policy.

Pursuant to this policy, individuals who cannot verify a LACO address and do not have third party coverage (e.g., Medi-Cal, Medicare) or who cannot pay full charges, will <u>not</u> receive non-emergency care. This policy does not apply to Public Health Services.

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From initial policy implementation through September 2004, 1,872 patients were deferred pursuant to these policy changes. Of the patients deferred, 767 (41%) presented as residing in another California County, 226 (12%) self deferred, 409 (22%) as residing in another country, and 470 (25%) indicated they lived in LACO, but could not provide address verification.

The MAC implemented Emergency Department (ED) Transfer procedures in July 2003, requiring the transferring ED to provide proof of LACO residency. From July 2003 through September 2004, the MAC identified 319 patients with addresses outside LACO. The MAC accepted for transfer 152 (48%) of the 319 patients. The 152 were accepted for the primary reasons of the Emergency Medical Treatment and Active Labor Act (EMTALA) regulations and DHS facility bed availability.

In the meantime, if you have any questions or need additional information, please let me know.

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c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors